

**Level 2, Level 3 & Level 4  
Interconnection Request Application Form  
(Greater than 10 kW to 10 MW or less)**

**Interconnection Customer Contact Information**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Daytime): \_\_\_\_\_ (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Alternative Contact Information (if different from Customer Contact Information)

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Daytime): \_\_\_\_\_ (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Facility Address (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Electric Distribution Company (EDC) serving Facility site: \_\_\_\_\_

Electric Supplier (if different from EDC): \_\_\_\_\_

Account Number of Facility site (existing EDC customers): \_\_\_\_\_

Inverter Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_

**Equipment Contractor**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Daytime): \_\_\_\_\_ (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**Electrical Contractor** (if Different from Equipment Contractor):

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Daytime): \_\_\_\_\_ (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

License number: \_\_\_\_\_

**Electric Service Information for Customer Facility Where Generator Will Be Interconnected**

Capacity: \_\_\_\_\_(Amps) Voltage: \_\_\_\_\_(Volts)

Type of Service: ☐ Single Phase ☐ Three Phase

If 3 Phase Transformer, Indicate Type

Primary Winding ☐ Wye ☐ Delta

Secondary Winding ☐ Wye ☐ Delta

Transformer Size: \_\_\_\_\_ Impedance: \_\_\_\_\_

**Intent of Generation**

☐ Offset Load (Unit will operate in parallel, but will not export power to EDC)

☐ Net Meter (Unit will operate in parallel and will export power pursuant to Illinois Net Metering or other filed tariff(s))

☐ Wholesale Market Transaction (Unit will operate in parallel and participate in PJM or MISO market(s) pursuant to a PJM Wholesale Market Participation Agreement or MISO equivalent)

☐ Back-up Generation (Units that temporarily operate in parallel with the electric distribution system for more than 100 milliseconds)

Note: Backup units that do not operate in parallel for more than 100 milliseconds do not need an interconnection agreement.

## **Generator & Prime Mover Data**

ENERGY SOURCE (Hydro, Wind, Solar, Process Byproduct, Biomass, Oil, Natural Gas, Coal, etc.):		
ENERGY CONVERTER TYPE (Wind Turbine, Photovoltaic Cell, Fuel Cell, Steam Turbine, etc.):		
GENERATOR SIZE:  <input type="checkbox"/> kW or <input type="checkbox"/> kVA	NUMBER OF UNITS:	TOTAL CAPACITY:  <input type="checkbox"/> kW or <input type="checkbox"/> kVA
GENERATOR TYPE (Check one):  <input type="checkbox"/> Induction <input type="checkbox"/> Inverter <input type="checkbox"/> Synchronous <input type="checkbox"/> Other _____		

## **Requested Procedure Under Which to Evaluate Interconnection Request<sup>1</sup>**

Please indicate below which review procedure applies to the interconnection request. The review procedure used is subject to confirmation by the EDC.

- ☐ **Level 2** – Lab-certified interconnection equipment with an aggregate electric nameplate capacity less than or equal to 2 MW. Lab certified is defined in 466.30 (Application fee is \$100.00 plus \$1.00 per kW).
- ☐ **Level 3** – Distributed generation facility does not export power. Nameplate capacity rating is equal to less than or equal to 50KW if connecting to area network or equal to or less than or equal to 10 MW if connecting to a radial distribution feeder. (Application fee amount is \$500.00 plus \$2.00 per kW).
- ☐ **Level 4** – Nameplate capacity rating is less than or equal to 10 MW and the distributed generation facility does not qualify for a Level 1, Level 2 or Level 3 review or, the distributed generation facility has been reviewed but not approved under a Level 1, Level 2 or Level 3 review. (Application fee amount is \$1,000 plus \$2.00 per kW, to be applied toward any subsequent studies related to this application).

<sup>1</sup> **Note:** Descriptions for interconnection review categories do not list all criteria that must be satisfied. For a complete list of criteria, please refer to **83 III. Admin. Code Part 466, Electric Interconnection**.

## **Distributed Generation Facility Information**

**Estimated Commissioning Date:** \_\_\_\_\_

**List interconnection components/system(s) to be used in the Distributed Generation Facility that are lab certified.**

Component/System	NRTL Providing Label & Listing
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

*Please provide copies of manufacturer brochures or technical specifications*

### **Energy Production Equipment/Inverter Information:**

☐ Synchronous    ☐ Induction    ☐ Inverter    ☐ Other \_\_\_\_\_

Rating: \_\_\_\_\_ kW                      Rating: \_\_\_\_\_ kVA

Rated Voltage: \_\_\_\_\_ Volts

Rated Current: \_\_\_\_\_ Amps

System Type Tested (Total System): ☐ Yes    ☐ No; attach product literature

### **For Synchronous Machines:**

***Note: Contact EDC to determine if all the information requested in this section is required for the proposed distributed generation facility.***

Manufacturer: \_\_\_\_\_

Model No. \_\_\_\_\_ Version No. \_\_\_\_\_

Submit copies of the Saturation Curve and the Vee Curve

☐ Salient    ☐ Non-Salient

Torque: \_\_\_\_\_ lb-ft    Rated RPM: \_\_\_\_\_    Field Amperes: \_\_\_\_\_ at rated generator voltage and current and \_\_\_\_\_ % PF over-excited

Type of Exciter: \_\_\_\_\_

Output Power of Exciter: \_\_\_\_\_

Type of Voltage Regulator: \_\_\_\_\_ Locked Rotor

Current: \_\_\_\_\_ Amps    Synchronous Speed: \_\_\_\_\_ RPM

Winding Connection: \_\_\_\_\_    Min. Operating Freq./Time: \_\_\_\_\_

Generator Connection: ☐ Delta    ☐ Wye    ☐ Wye Grounded

Direct-axis Synchronous Reactance (Xd) \_\_\_\_\_ ohms  
Direct-axis Transient Reactance (X'd) \_\_\_\_\_ ohms  
Direct-axis Sub-transient Reactance (X''d) \_\_\_\_\_ ohms  
Negative Sequence Reactance: \_\_\_\_\_ ohms  
Zero Sequence Reactance: \_\_\_\_\_ ohms  
Neutral Impedance or Grounding Resistor (if any): \_\_\_\_\_ ohms

### For Induction Machines:

**Note: Contact EDC to determine if all the information requested in this section is required for the proposed distributed generation facility.**

Manufacturer: \_\_\_\_\_  
Model No. \_\_\_\_\_ Version No. \_\_\_\_\_  
Locked Rotor Current: \_\_\_\_\_ Amps  
Rotor Resistance (Rr) \_\_\_\_\_ ohms Exciting Current \_\_\_\_\_ Amps  
Rotor Reactance (Xr) \_\_\_\_\_ ohms Reactive Power Required: \_\_\_\_\_  
Magnetizing Reactance (Xm) \_\_\_\_\_ ohms \_\_\_\_\_ VARs (No Load)  
Stator Resistance (Rs) \_\_\_\_\_ ohms \_\_\_\_\_ VARs (Full Load)  
Stator Reactance (Xs) \_\_\_\_\_ ohms  
Short Circuit Reactance (X''d) \_\_\_\_\_ ohms  
Phases: ☐ Single ☐ Three-Phase  
Frame Size: \_\_\_\_\_ Design Letter: \_\_\_\_\_ Temp. Rise: \_\_\_\_\_ °C.

### Reverse Power Relay Information (Level 3 Review Only)

Manufacturer: \_\_\_\_\_  
Relay Type: \_\_\_\_\_ Model Number: \_\_\_\_\_  
Reverse Power Setting: \_\_\_\_\_  
Reverse Power Time Delay (if any): \_\_\_\_\_

### Additional Information For Inverter Based Facilities

#### Inverter Information:

Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_  
Type: ☐ Forced Commutated ☐ Line Commutated  
Rated Output \_\_\_\_\_ Watts \_\_\_\_\_ Volts  
Efficiency \_\_\_\_\_ % Power Factor \_\_\_\_\_ %  
Inverter UL1547 Listed: : ☐ Yes ☐ No

**DC Source / Prime Mover:**

Rating: \_\_\_\_\_ kW                      Rating: \_\_\_\_\_ kVA  
Rated Voltage: \_\_\_\_\_ Volts  
Open Circuit Voltage (If applicable): \_\_\_\_\_ Volts  
Rated Current: \_\_\_\_\_ Amps  
Short Circuit Current (If applicable): \_\_\_\_\_ Amps

**Other Facility Information:**

One Line Diagram attached: ☐ Yes  
Plot Plan attached: ☐ Yes

**Customer Signature**

I hereby certify that all of the information provided in this Interconnection Request Application Form is true.

Applicant Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

An application fee is required before the application can be processed. Please verify that the appropriate fee is included with the application:

Amount \_\_\_\_\_

**EDC Acknowledgement**

Receipt of the application fee is acknowledged and this interconnection request is complete.

EDC Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_